



TECHNICAL NOTES
MONTHLY NEWSLETTER
BEHAVIORAL HEALTHCARE PERFORMANCE MEASUREMENT SYSTEM

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REMINDER:

3Q2015 Data are due for transmission to The Joint Commission in January.

NRI IS YOUR FULL SERVICES PARTNER FOR QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT

NRI's Behavioral Healthcare Performance Measurement System has been recognized as the premiere vendor for performance measurement services for inpatient psychiatric facilities since its inception in 1999. We understand the unique needs of behavioral healthcare providers because it is our sole focus.

Staff have extensive experience working with psychiatric hospitals on using data to inform practice and policy. The BHPMS Director is a member of technical panels for CMS and The Joint Commission. The staff have years of experience working with public mental health data system, performance improvement initiatives, and have co-authored numerous reports and publications.

As a trusted partner in performance measurement, we invite you to explore the additional services we provide. Please call us to discuss how we can help meet your needs: 703-738-8160.

Joint Commission/CMS Standards Compliance: Comprehensive or focused assessment to determine level of compliance of all applicable standards for your facility conducted by former Joint Commission or CMS surveyors. Standards clarification, training, mock surveys, and post survey compliance

plans are targeted to the facility's idiosyncratic needs.

Advanced customized analytics: Gain a better understanding of trends or personalized risk models to support data-driven decision making. Examples include trend analyses in the use of seclusion or restraint, forensic trends, length of stay profiles and difference in performance rates across specific patient populations.

Collaborative data integrity reviews: We provide a review of documentation and data systems, including systemic data flow, definition compliance, and assessing data accuracy and completeness to ensure reliability.

Program or process evaluation: When trying to assess if a program or process is working effectively, we provide an independent analysis of a program's objectives, activities, and outcomes using metric indicators.

Outcomes Measurement: Our decades of demonstrated expertise with behavioral health performance indicators can help your organization identify and implement those that are effective for your organization. Our expertise spans performance and outcome measure selection, development, data collection and analysis, and interpretation.

## SERVER MAINTENANCE

BHPMS servers will be off-line from Friday Feb 19 – Monday Feb 22, 2016 for maintenance and system upgrades. Users will not be able to access the website, upload data, or retrieve reports during this period. Liaisons will continue to provide technical services and address user questions. We appreciate your patience while we upgrade critical systems.

## FULL SERVICES PARTNER (CONTINUED)

**Data resource evaluation:** Move beyond gathering data to meet regulatory compliance toward applied use of information for treatment planning, service evaluation and policy development.

**Psychometric testing of surveys:** Our expert statisticians can help you determine a survey's reliability and validity for your population. Staff have strengths in survey design, testing and implementation analyses.

### BHPMS Customer Survey

In our ongoing effort to provide the best quality and value in performance measurement services, we are conducting a survey to gain input on the services, processes, and resources provided to members of the Behavioral Healthcare Performance Measurement System (BHPMS). We will use the results to improve our existing services and to develop new services tailored to users' needs.

Our goal is to achieve a 100% response rate from member facilities, so your input

is greatly appreciated. An email was sent to the primary contact at each facility and each state on Jan 12<sup>th</sup> with a link for the on-line survey ; the survey should take 10-15 minutes to complete. At the end of the survey, you will have the opportunity to participate in a Keurig Brewer drawing on behalf of your facility.

### Interactive, small group webinars to start this year.

In response to facility requests for more direct networking with fellow psychiatric facilities, we will begin a series of small group focused learning opportunities.

On behalf of all the NRI staff, we thank you for your dedication to improving the quality of psychiatric care. Please feel free to contact me or any of the staff with feedback and suggestions on how our services can better meet your needs.

Regards,

Lucille Schacht, Director

## SYSTEM UPDATES

### Annual Review of NRI Authorized Access Accounts

Facility Primary Contacts should review and update the current list of account users. To access the list, log into the secure BHPMS website and retrieve the User Listing Report - Facility from the User Functions/Monthly Processing Page, in the Enrollment Information list. Please notify us if there are any accounts changes by faxing the report to (703) 738-8185.

## CMS Quality Net Security Administrator Reminder

All Inpatient Psychiatric Facilities should ensure an active Security Administrator account at Quality Net in order to stay in compliance with the IPFQR program requirements. Security Administrators should log into the secure Quality Net portal at least monthly to maintain an active account. It is best practice to have at least two accounts, a primary and backup administrator to ensure access is maintained. If your primary administrator leaves, the facility is responsible for ensuring an alternate user has been granted access.

## CMS UPDATES: REQUIRED REPORTING OF HEALTHCARE PERSONNEL INFLUENZA VACCINE

All facilities participating in the CMS Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program must be registered with the National Healthcare Safety Network (NHSN) in order to submit Influenza Vaccination among Healthcare Personnel (HCP) measure data. Vendors do not have authority to submit these data on behalf of facilities; each facility must submit their own data to meet the CMS requirement.

Failure to **register with the NHSN prior to March 4, 2016** may jeopardize a facility's ability to submit healthcare personnel's influenza vaccine data prior to the Sunday, May 15, 2016, submission deadline. Facilities that do not complete NHSN enrollment and the data submission prior to the aforementioned deadlines may be subject to a two percentage point reduction in their Fiscal Year 2017 annual Medicare payment update from CMS.

Details about the 5-Step NHSN Enrollment Process can be accessed at the following NHSN website hyperlinks for Inpatient Psychiatric Facilities (IPFs): <http://www.cdc.gov/nhsn/ipfs/enroll.html> Once the steps for NHSN enrollment are completed, you must set-up your facility for IPF reporting by visiting the NHSN Setup page:

<http://www.cdc.gov/nhsn/ipfs/setup.html> The CMS Support Contractor will host a webinar on the NHSN Registration and Influenza among Healthcare Personnel Measure Refresher in February 2016. View upcoming webinars here: <http://www.qualityreportingcenter.com/inpatient/ipf/upcoming/>

If you have questions, please contact the NHSN Help Desk ([NHSN@cdc.gov](mailto:NHSN@cdc.gov)).

## NRI RESPONDS TO THE CMS MEASURES UNDER CONSIDERATION FOR PSYCHIATRIC HOSPITALS

In December 2015, CMS announced three measures under consideration for the Inpatient Psychiatric Facility Quality Reporting (IPFQR) program. The measures relate to alcohol and other drug use disorder treatment provided or offered at discharge and thirty-day all-cause unplanned readmissions following psychiatric hospitalization in an inpatient psychiatric facility. The measures, if adopted, would go into effect for the FY2019 payment determination (reporting period January – December 2017). The final rule is expected to be released in August 2016 via the Federal Register.

Read NRI's comments on the proposed measures here:

[http://media.wix.com/ugd/186708\\_abee53ad9c6342caaa80eec6044d75d2.pdf](http://media.wix.com/ugd/186708_abee53ad9c6342caaa80eec6044d75d2.pdf)

Keep track of CMS measure requirements on the NRI page for the IPFQR:

<http://www.nri-inc.org/#!/cms-quality-program/c6gk>

## CALENDAR OF EVENTS

### The Joint Commission Transmissions 2016

#### January

(Jul – Sep 2015 data)

#### April

(Oct – Dec 2015 data)

#### July

(Jan – Mar 2016 data)

#### October

(Apr – Jun 2016 data)

### CMS transmission 2016

July 1 – Aug 15, 2016

Calendar 2015 data

### Holidays - Office Closed

January 18, 2016

February 15, 2016

**LIVE**

Monthly  
Educational  
Webinar

Wednesday  
February 17, 2016

2:00 pm (ET)

## NRI ASSISTS 26 PSYCHIATRIC HOSPITALS ACHIEVE TOP PERFORMANCE STATUS FROM THE JOINT COMMISSION

The Joint Commission released the list of 2014 *Top Performers on Key Quality Indicators*<sup>®</sup> and 26 inpatient psychiatric hospitals that are members of NRI's Behavioral Healthcare Performance Measurement System were acknowledged. These 26 hospitals achieved exceptional performance on the Hospital Based Inpatient Psychiatric Services (HBIPS) measures in 2014.

A key attribute of NRI's services is the personal attention provided to each member inpatient psychiatric hospital. NRI's highly trained data analysts assist facilities with interpreting measure rates, detecting trends in data over time, and comparing to target performance levels. This enables facilities to closely monitor performance rates and take action to improve when indicated. NRI's ongoing educational opportunities equip facilities to understand the complex relationship between performance measurement, payment, and achieving best practices in the new era of healthcare.



The Joint Commission's  
Top Performer on  
Key Quality Measures<sup>®</sup>  
2014

NRI congratulates its 26 Top Performers for their commitment to assuring that evidence-based interventions are delivered to patients in a timely and accurate manner.

To see the full list of 2014 Joint Commission *Top Performers on Key Quality Indicators*<sup>®</sup>:

[http://www.jointcommission.org/2014\\_hospital\\_list\\_of\\_the\\_joint\\_commission%E2%80%99s\\_top\\_performer\\_on\\_key\\_quality\\_measures%C2%AE/](http://www.jointcommission.org/2014_hospital_list_of_the_joint_commission%E2%80%99s_top_performer_on_key_quality_measures%C2%AE/)

## EDUCATIONAL WEBINARS 2016 SCHEDULE

Educational Webinars will resume February 17, 2016. This session will focus on the quality aspects of the new Transition Record measures and the Metabolic Screen measure.

In addition to general open sessions, we will have a series of focused small-group interactive webinars to facilitate shared learnings on topics of high importance. We anticipate that these sessions can lead to further sharing with other member facilities through the general open sessions. Information on signing up for these small groups will be provided in future issues of Technical Notes.

### Accessing old Webinars

For recordings from past Educational Webinars, please contact [alex.dorisca@nri-inc.org](mailto:alex.dorisca@nri-inc.org).

## CMS Support Contractor Webinars

Jan 7, 2016 session provided information on accessing the preview reports and provided a preview of FY2016 results

Access from IPF:  
Archived Events at  
[www.qualityreportingcenter.com](http://www.qualityreportingcenter.com)

### CMS 2016 PAYMENT DETERMINATION PREVIEW BEGINS

CMS notified all facilities of their standing for the 2016 payment determination in September 2015. Several facilities submitted requests for reconsideration. NRI has learned that a few facilities are being denied full payment because the Quality Net Administrator account was inactive on August 15, 2015 – the final day of reporting.

CMS has enabled the public preview reports for Psychiatric Facilities to review prior to the public release in April 2016. The preview reports are available from January 16–February 14, 2016. The preview reports include data for January – December 2014. Facilities will see their rates, plus state and national rates for all measures. Psychiatric facilities should take this opportunity to review their data prior to the public release. Public release will occur on both the Hospital Compare website and at <https://data.medicare.gov>.

Psychiatric facilities can access the preview report through the secure Quality Net portal. Once logged in, select the “Run Reports” from the “My Reports” drop-down, then proceed with the following steps:

- In the “Report Program” drop-down, select “IPFQR”
- In the “Report Category” drop-down, select “Public Reporting – Preview Reports”
- Click the “View Reports” button. A list of reports will be displayed below
- Under the heading “Report Name,” select “Public Reporting – Preview Reports”
- Select [Run Reports]. (This puts the report into a queue.)

To review the report, select the “Search Reports” tab. The report requested will display as well as the report status. A green check mark will display in the “Status” column when the report is complete. Once complete, the report can be viewed or downloaded using the icons at the far right.

Please note that in order to run the report, users must either be the Security Administrator or have the role “File Exchange and Search.” Issues with Quality Net access should be reported to the QualityNet Help Desk by email to [qnet-support@hcqis.org](mailto:qnet-support@hcqis.org). Issues with the report content should be reported to the IPFQR Support Contractor at 866-800-8765 or at [IPFQualityReporting@HCOIS.org](mailto:IPFQualityReporting@HCOIS.org). The Support Contractor has also posted IPFQR Hospital Compare Preview Report Quick Reference Guide on the QualityNet website: <https://www.qualitynet.org> and [www.QualityReportingCenter.com](http://www.QualityReportingCenter.com).

#### Follow-up After Hospitalization Measure Suppressed by CMS for 2016 Payment Determination

The Follow-up After Hospitalization (FUH) for Mental Illness 7-day and 30-day measure results will be suppressed by CMS for the public release of 2014 data. Problems encountered with the coding and calculation of the initial FUH measure results prevented them from being reported. N/A will be displayed on the Preview Report and on Hospital Compare.

## Behavioral Healthcare Performance Measurement System (BHPMS)

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## **DANGEROUS DENIZENS: PREPARING STAFF, LAW ENFORCEMENT, AND YOUR HOSPITAL TO MANAGE FORENSIC PATIENTS**

Adapted from: The Joint Commission (October 2015), *Environment of Care News*, 18(10), pp. 1-11, by Richard Fields, M.D.

In June of 2010, The Joint Commission's Sentinel Event Alert Issue 45, *Preventing Violence In the Healthcare Setting*, warned that there was a significant increase in crime and acts of violent aggression in healthcare settings. Some of this risk is directly related to the fact that hospitals are also increasingly called upon to provide care and treatment services to forensic/prisoner patients. As one might expect, there is the particular risk of danger and harm when such patients attempt to escape from the healthcare setting. This was further confirmed by the [2011 Prisoner Escape Study](#)<sup>1</sup>. In that study, the most frequent locations for attempted escapes were identified as clinical treatment areas (39.4%), restrooms (29.3%) and areas immediately outside the hospital (17.2%). The study also makes it clear that "escapes most frequently occurred when policies or procedures were not followed according to regulation and practice". Accordingly, the Joint Commission recommends clearly defined and standardized written policies on managing forensic/prisoner patients, including training for staff (e.g., PC.03.05.17) and external law enforcement (e.g., HR.01.04.01, EP 7), adequate staffing and ensuring a safe, appropriate area for serving these patients (EC.02.01.01, EP 1).

The 2011 Prisoner Escape Study revealed additional factors contributing to escape attempts (e.g., communication delays, faulty equipment) and provides another dozen recommendations to reduce or eliminate escapes from healthcare facilities. Download the full study and list of recommendations here:

<http://www.campussafetymagazine.com/files/resources/2011prisonerescapestudy-1.pdf>

<sup>1</sup> Mikow-Porto, V. & Smith, T. (2011). The 2011 Prisoner Escape Study. International Healthcare Security and Safety Foundation. Retrieved 12/14/2015 from <http://www.campussafetymagazine.com/files/resources/2011prisonerescapestudy-1.pdf>

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*NRI operates the Behavioral Healthcare Performance Measurement System (BHPMS) to assist hospitals in meeting the requirements of the ORYX® initiative, of The Joint Commission and the IPFQR requirements of CMS. In addition to performance and outcome measurement, the BHPMS offers enhanced technical assistance, data quality reviews, and specialized reports for private and public psychiatric facilities.*